

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Christensen for Congress

ADDRESS (number and street)

220 W ALTA ROAD

Check if different
than previously
reported. (ACC)

Alta

WY

84341

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00607176

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

WY

00

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
08 16 2016in the
State of

WY

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
07 01 2016

through

M M / D D / Y Y Y Y
07 27 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer William O. Driskill

Signature of Treasurer

William O. Driskill

[Electronically Filed]

Date

M M / D D / Y Y Y Y
08 04 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 37

Write or Type Committee Name

Christensen for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	14467.08	115455.08
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	14467.08	115455.08
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	36855.96	101147.59
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.10
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	36855.96	101147.49
8. Cash on Hand at Close of Reporting Period (from Line 27).....	20807.59	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	6500.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

PAGE 3 / 37

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Christensen for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	6

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

11342.08

101421.08

(ii) Unitemized.....

1875.00

10784.00

(iii) TOTAL of contributions from individuals ▶

13217.08

112205.08

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

1250.00

3250.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

14467.08

115455.08

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

6500.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

6500.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.10

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

14467.08

121955.18

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 37

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	36855.96	101147.59
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	36855.96	101147.59

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	43196.47
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	14467.08
25. SUBTOTAL (add Line 23 and Line 24).....	57663.55
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	36855.96
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	20807.59

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 37

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

MICKEY BABCOCKMailing Address **BOX 688**

City

WILSON

State

WY

Zip Code

83014-0688FEC ID number of contributing
federal political committee.**C**

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2016

Transaction ID : SA11A.223

Amount of Each Receipt this Period

1000.00
☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

LAURIE BOXMailing Address **2090 ROAD 124**

City

CHEYENNE

State

WY

Zip Code

82009-9133FEC ID number of contributing
federal political committee.**C**

Name of Employer

SELF

Occupation

AUTHOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		19		2016

Transaction ID : SA11A.220

Amount of Each Receipt this Period

500.00
☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

MAURICE BROWNMailing Address **614 S GREELY HWY**

City

CHEYENNE

State

WY

Zip Code

82007-2850FEC ID number of contributing
federal political committee.**C**

Name of Employer

TOWN AND COUNTRY SUPERMARKET LIQU

Occupation

SELF EMPLOYED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2016

Transaction ID : SA11A.211

Amount of Each Receipt this Period

1000.00
☐ Memo Item
CONTRIBUTION
SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....**2500.00**

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 37

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

KELLY CIRCLE

A.

Mailing Address PO BOX 85

City

DRIGGS

State

ID

Zip Code

83422-0085

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INSURANCE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2016

Transaction ID : SA11A.209

Amount of Each Receipt this Period

500.00

☐ Memo Item
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

NANCY CLANCY

B.

Mailing Address P.O. BOX 1674

City

JACKSON

State

WY

Zip Code

83001-1674

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

REAL ESTATE BROKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2016

Transaction ID : SA11A.241

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

ANN FRAME

C.

Mailing Address P.O. BOX 3781

City

JACKSON

State

WY

Zip Code

83001-3781

FEC ID number of contributing
federal political committee.

C

Name of Employer

BEDDOW CAPITAL

Occupation

ADMINISTRATIVE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2016

Transaction ID : SA11A.224

Amount of Each Receipt this Period

500.00

☐ Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 37

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

S. DOUGLAS GEORGE MD

Mailing Address 4640 STILSON RANCH RD

City
WILSONState
WYZip Code
83014-9125FEC ID number of contributing
federal political committee.

C

Name of Employer
WOMEN'S HEALTH CENTEROccupation
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2016

Transaction ID : SA11A.226

Amount of Each Receipt this Period

1000.00

☐ Memo Item
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

TRACY HANSEN

Mailing Address 8972 AVERY DRIVE

City
VICTORState
IDZip Code
83455-5129FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
LOG HOME RESTORATION

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		23		2016

Transaction ID : SA11A.245

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOHN JOHNSON

Mailing Address PO BOX 50630

City
CASPERState
WYZip Code
82605-0630FEC ID number of contributing
federal political committee.

C

Name of Employer
JOHNSON RESTAURANT GROUP INCOccupation
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2016

Transaction ID : SA11A.212

Amount of Each Receipt this Period

1000.00

☐ Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 8 OF 37

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

KEN LANTTA

Mailing Address 740 WEST 55TH STREET

City

CASPER

State

WY

Zip Code

82601-6436

FEC ID number of contributing
federal political committee.

C

Name of Employer
KDL CONSULTING, LLCOccupation
OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

892.08

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
07		15		2016

Transaction ID : SA11A.208

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

KEN LANTTA

Mailing Address 740 WEST 55TH STREET

City

CASPER

State

WY

Zip Code

82601-6436

FEC ID number of contributing
federal political committee.

C

Name of Employer
KDL CONSULTING, LLCOccupation
OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

892.08

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.221

Amount of Each Receipt this Period

192.08

☐ Memo Item
IN-KIND CONTRIBUTION

Full Name (Last, First, Middle Initial)

KEN LANTTA

Mailing Address 740 WEST 55TH STREET

City

CASPER

State

WY

Zip Code

82601-6436

FEC ID number of contributing
federal political committee.

C

Name of Employer
KDL CONSULTING, LLCOccupation
OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

892.08

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.242

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION
SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

542.08

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 37

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

ROBERT F. LENZ**A.**

Mailing Address PO BOX 2530

City

JACKSON

State

WY

Zip Code

83001-2530

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2016

Transaction ID : SA11A.227

Amount of Each Receipt this Period

500.00

☐ Memo Item
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

STEVE MEADOWS**B.**

Mailing Address P.O. BOX 1948

City

JACKSON

State

WY

Zip Code

83001-1948

FEC ID number of contributing
federal political committee.

C

Name of Employer

ELK COUNTRY MOTELS, INC.

Occupation

HOTELIER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		05		2016

Transaction ID : SA11A.203

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

SUZETTE MOLINE**C.**

Mailing Address PO BOX 982

City

SUNDANCE

State

WY

Zip Code

82729-0982

FEC ID number of contributing
federal political committee.

C

Name of Employer

FARM CREDIT BUREAU INSURANCE

Occupation

INSURANCE AGENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2016

Transaction ID : SA11A.218

Amount of Each Receipt this Period

1000.00

☐ Memo Item
 CONTRIBUTION
SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 37

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

EDWARD PROSSER**A.**

Mailing Address PO BOX 14

City

CHEYENNE

State

WY

Zip Code

82003-0014

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

RANCHER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2016

Transaction ID : SA11A.236

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

WILLIAM B. RESOR**B.**

Mailing Address 4445 MOOSE WILSON RD

City

WILSON

State

WY

Zip Code

83014-9680

FEC ID number of contributing
federal political committee.

C

Name of Employer

CRYSTAL SPRINGS RANCH

Occupation

SELF EMPLOYED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2016

Transaction ID : SA11A.230

Amount of Each Receipt this Period

1000.00

☐ Memo Item
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

ALAN THORN**C.**

Mailing Address 7598 OBSIDIAN ROAD

City

TETON VILLAGE

State

WY

Zip Code

83025-

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2016

Transaction ID : SA11A.232

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CONTRIBUTION
SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 37

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

THOMAS TRIPP**A.**

Mailing Address P.O. BOX 77

City

WILSON

State

WY

Zip Code

83014-0077

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2016

Transaction ID : SA11A.222

Amount of Each Receipt this Period

1000.00

☐ Memo Item
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

PETER P. VAN ROIJEN**B.**

Mailing Address PO BOX 2030

City

WILSON

State

WY

Zip Code

83014-2030

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2016

Transaction ID : SA11A.206

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

G. LORIN WILSON**C.**

Mailing Address 955 ALTA N RD

City

ALTA

State

WY

Zip Code

83414-4577

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2016

Transaction ID : SA11A.247

Amount of Each Receipt this Period

300.00

☐ Memo Item
 CONTRIBUTION
SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1550.00

11342.08

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 37

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

WLRA PAC

Mailing Address PO BOX 1003

City

CHEYENNE

State

WY

Zip Code

82003-1003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2016

Transaction ID : SA11C.234

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

HOLLAND & HART LLP FEDERAL PAC

Mailing Address 555 17TH ST
SUITE 3200

City

DENVER

State

CO

Zip Code

80202-

FEC ID number of contributing
federal political committee.

C C00137729

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2016

Transaction ID : SA11C.248

Amount of Each Receipt this Period

1000.00

☐ Memo Item
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

1250.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

A. HUNTER CHRISTENSEN

Mailing Address 220 WEST ALTA RD.

City	State	Zip Code
ALTA	WY	83414

Purpose of Disbursement
TRAVEL/FOOD/BEVERAGE/EQUIP PURCHASE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2016

Amount of Each Disbursement this Period

818.90

☐ Memo Item

Transaction ID : SB17-0.0004

B. ARBYS

Mailing Address 2720 S DOUGLAS HWY

City	State	Zip Code
GILLETTE	WY	82718

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2016

Amount of Each Disbursement this Period

17.49

☒ Memo Item

Transaction ID : SB17-1.0020

C. BASIN TRAVEL

Mailing Address 111 N MAIN

City	State	Zip Code
DRIGGS	ID	83422

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2016

Amount of Each Disbursement this Period

9.00

☒ Memo Item

Transaction ID : SB17-1.0022

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

818.90

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

A. LOWES

Mailing Address 1608 PRARIE AVE

City	State	Zip Code
CHEYENNE	WY	82009

Purpose of Disbursement
EQUIPMENT PURCHASE

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2016

Amount of Each Disbursement this Period

78.95

☒ Memo Item

Transaction ID : SB17-1.0027

B. MCDONALDS

Mailing Address 506 CAMEL DR

City	State	Zip Code
GILLETTE	WY	82716

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2016

Amount of Each Disbursement this Period

50.95

☒ Memo Item

Transaction ID : SB17-1.0017

C. PIT STOP

Mailing Address 838 N FEDERAL BLVD

City	State	Zip Code
RIVERTON	WY	82501

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2016

Amount of Each Disbursement this Period

24.42

☒ Memo Item

Transaction ID : SB17-1.0023

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

A. PROBUILD

Mailing Address 1938 SHERIDAN AVE

City	State	Zip Code
CODY	WY	82414

Purpose of Disbursement
EQUIPMENT PURCHASE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2016

Amount of Each Disbursement this Period

61.83

☒ Memo Item

Transaction ID : SB17-1.0029

B. PUMP N PACK

Mailing Address 1115 W YELLOWSTONE

City	State	Zip Code
DOUGLAS	WY	82633

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2016

Amount of Each Disbursement this Period

25.25

☒ Memo Item

Transaction ID : SB17-1.0019

C. TRACTOR SUPPLY CO

Mailing Address 10643 HYNDS BLVD

City	State	Zip Code
CHEYENNE	WY	82009

Purpose of Disbursement
EQUIPMENT PURCHASE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2016

Amount of Each Disbursement this Period

16.94

☒ Memo Item

Transaction ID : SB17-1.0028

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

A. VALLEY LUMBER AND SUPPLY

Mailing Address 290 NORTH 2ND ST

City	State	Zip Code
LANDER	WY	82520

Purpose of Disbursement
EQUIPMENT PURCHASE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 01 / 2016

Amount of Each Disbursement this Period

140.50

☒ Memo Item

Transaction ID : SB17-1.0018

B. WALMART

Mailing Address 1695 COFFEEN AVE

City	State	Zip Code
SHERIDAN	WY	82801

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 01 / 2016

Amount of Each Disbursement this Period

70.29

☒ Memo Item

Transaction ID : SB17-1.0026

C. LELAND CHRISTENSEN

Mailing Address 220 WEST ALTA RD.

City	State	Zip Code
ALTA	WY	83414

Purpose of Disbursement
TRAVEL/FOOD/BEVERAGE/EQUIP PURCHASE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 01 / 2016

Amount of Each Disbursement this Period

864.81

☐ Memo Item

Transaction ID : SB17-0.0003

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

864.81

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

A. ALBERTSONS

Mailing Address 2625 EAST 2ND ST

City	State	Zip Code
CASPER	WY	82609

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 01 / 2016

Amount of Each Disbursement this Period

18.38

☒ Memo Item

Transaction ID : SB17-1.0015

B. ARBYS

Mailing Address 2720 S DOUGLAS HWY

City	State	Zip Code
GILLETTE	WY	82718

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 01 / 2016

Amount of Each Disbursement this Period

9.73

☒ Memo Item

Transaction ID : SB17-1.0005

c. BIG D

Mailing Address 1561 SNOWY RIDGE RD

City	State	Zip Code
LARAMIE	WY	82070

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 01 / 2016

Amount of Each Disbursement this Period

59.93

☒ Memo Item

Transaction ID : SB17-1.0009

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

A. EXXON

Mailing Address 8116 HWY 789

City	State	Zip Code
LANDER	WY	82520

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
07 / 01 / 2016

Amount of Each Disbursement this Period

65.55

☒ Memo Item

Transaction ID : SB17-1.0008

B. HOLIDAY INN EXPRESS

Mailing Address 106 EAST US HWY 16

City	State	Zip Code
BUFFALO	WY	82834

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
07 / 01 / 2016

Amount of Each Disbursement this Period

96.12

☒ Memo Item

Transaction ID : SB17-1.0001

C. HOME DEPOT

Mailing Address 2050 COFFEEN AVE

City	State	Zip Code
SHERIDAN	WY	82801

Purpose of Disbursement
EQUIPMENT PURCHASE

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
07 / 01 / 2016

Amount of Each Disbursement this Period

70.91

☒ Memo Item

Transaction ID : SB17-1.0004

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

A. LOAF N JUG

Mailing Address 2800 SOUTH HWY 59

City	State	Zip Code
GILLETTE	WY	82718

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2016

Amount of Each Disbursement this Period

78.08

☒ Memo Item

Transaction ID : SB17-1.0007

B. MAVERIK

Mailing Address 140 GARDENIA DR

City	State	Zip Code
CHEYENNE	WY	82009

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2016

Amount of Each Disbursement this Period

44.19

☒ Memo Item

Transaction ID : SB17-1.0010

C. MCDONALDS

Mailing Address 506 CAMEL DR

City	State	Zip Code
GILLETTE	WY	82716

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2016

Amount of Each Disbursement this Period

85.37

☒ Memo Item

Transaction ID : SB17-1.0002

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

--

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

A. PERKINS

Mailing Address 4710 EAST 2ND ST

City	State	Zip Code
CASPER	WY	82609

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 01 / 2016

Amount of Each Disbursement this Period

32.30

☒ Memo Item

Transaction ID : SB17-1.0016

B. PIT STOP

Mailing Address 838 N FEDERAL BLVD

City	State	Zip Code
RIVERTON	WY	82501

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 01 / 2016

Amount of Each Disbursement this Period

76.52

☒ Memo Item

Transaction ID : SB17-1.0014

C. PUMP N PACK

Mailing Address 1115 W YELLOWSTONE

City	State	Zip Code
DOUGLAS	WY	82633

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 01 / 2016

Amount of Each Disbursement this Period

47.83

☒ Memo Item

Transaction ID : SB17-1.0003

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

A. SAFEWAY

Mailing Address 1125 W MAIN ST

City	State	Zip Code
LANDER	WY	82520

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2016

Amount of Each Disbursement this Period

43.73

☒ Memo Item

Transaction ID : SB17-1.0012

B. TACO JOHNS

Mailing Address 3533 WEST YELLOWSTONE

City	State	Zip Code
MILLS	WY	82644

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2016

Amount of Each Disbursement this Period

5.20

☒ Memo Item

Transaction ID : SB17-1.0013

C. WALMART

Mailing Address 1695 COFFEEN AVE

City	State	Zip Code
SHERIDAN	WY	82801

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2016

Amount of Each Disbursement this Period

57.46

☒ Memo Item

Transaction ID : SB17-1.0006

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

--

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

A. WRANGLER

Mailing Address 580 W BROADWAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2016

City	State	Zip Code
JACKSON	WY	83001

Amount of Each Disbursement this Period

73.51

Purpose of Disbursement
TRAVELCategory/
Type☒ Memo Item

Transaction ID : SB17-1.0011

Candidate Name

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. LELAND CHRISTENSEN

Mailing Address 220 WEST ALTA RD.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		26		2016

City	State	Zip Code
ALTA	WY	83414

Amount of Each Disbursement this Period

887.06

Purpose of Disbursement
TRAVEL/FOOD/BEVERAGECategory/
Type☐ Memo Item

Transaction ID : SB17-0.0020

Candidate Name

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. BROULIM'S

Mailing Address 240 SOUTH MAIN

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		26		2016

City	State	Zip Code
DRIGGS	ID	83422

Amount of Each Disbursement this Period

61.72

Purpose of Disbursement
FOOD/BEVERAGECategory/
Type☒ Memo Item

Transaction ID : SB17-1.0032

Candidate Name

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

887.06

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

A. EXXON

Mailing Address 100 N GREELEY HWY

City	State	Zip Code
CHEYENNE	WY	82007

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		26		2016

Amount of Each Disbursement this Period

63.38

☒ Memo Item

Transaction ID : SB17-1.0037

B. FARMERS COOP

Mailing Address 1450 COFFEEN AVE

City	State	Zip Code
SHERIDAN	WY	82801

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		26		2016

Amount of Each Disbursement this Period

37.66

☒ Memo Item

Transaction ID : SB17-1.0035

C. GRAND VIEW GENERAL STORE

Mailing Address 6170 S MAIN

City	State	Zip Code
TETONIA	ID	83422

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		26		2016

Amount of Each Disbursement this Period

18.59

☒ Memo Item

Transaction ID : SB17-1.0034

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

A. HOLIDAY INN EXPRESS

Mailing Address 1809 SUGARLAND DR

City	State	Zip Code
SHERIDAN	WY	82801

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	Primary	General
	Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		26		2016

Amount of Each Disbursement this Period

97.90

☒ Memo Item

Transaction ID : SB17-1.0041

B. HOLIDAY INN EXPRESS

Mailing Address 900 W YELLOWSTONE HWY

City	State	Zip Code
DOUGLAS	WY	82633

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	Primary	General
	Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		26		2016

Amount of Each Disbursement this Period

96.12

☒ Memo Item

Transaction ID : SB17-1.0042

C. HOLIDAY INN EXPRESS

Mailing Address 4250 LEGION LANE

City	State	Zip Code
CASPER	WY	82609

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	Primary	General
	Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		26		2016

Amount of Each Disbursement this Period

97.01

☒ Memo Item

Transaction ID : SB17-1.0043

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

A. LOAF N JUG

Mailing Address 2800 SOUTH HWY 59

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		26		2016

City	State	Zip Code
GILLETTE	WY	82718

Amount of Each Disbursement this Period

138.58

Purpose of Disbursement
TRAVELCategory/
Type☒ Memo Item

Transaction ID : SB17-1.0031

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. MAVERIK

Mailing Address 425 S 6TH ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		26		2016

City	State	Zip Code
THERMOPOLIS	WY	82443

Amount of Each Disbursement this Period

5.55

Purpose of Disbursement
TRAVELCategory/
Type☒ Memo Item

Transaction ID : SB17-1.0038

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. MCDONALDS

Mailing Address 506 CAMEL DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		26		2016

City	State	Zip Code
GILLETTE	WY	82716

Amount of Each Disbursement this Period

51.87

Purpose of Disbursement
FOOD/BEVERAGECategory/
Type☒ Memo Item

Transaction ID : SB17-1.0033

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

A. PIT STOP

Mailing Address 838 N FEDERAL BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		26		2016

City	State	Zip Code
RIVERTON	WY	82501

Amount of Each Disbursement this Period

165.54

Purpose of Disbursement
TRAVELCategory/
Type☒ Memo Item

Transaction ID : SB17-1.0036

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. SUBWAY

Mailing Address 1088 WEST PINE ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		26		2016

City	State	Zip Code
PINEDALE	WY	82941

Amount of Each Disbursement this Period

8.68

Purpose of Disbursement
FOOD/BEVERAGECategory/
Type☒ Memo Item

Transaction ID : SB17-1.0039

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. TACO BELL

Mailing Address 1655 COFFEEN AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		26		2016

City	State	Zip Code
SHERIDAN	WY	82801

Amount of Each Disbursement this Period

20.75

Purpose of Disbursement
FOOD/BEVERAGECategory/
Type☒ Memo Item

Transaction ID : SB17-1.0040

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

A. THE FORT

Mailing Address PO BOX 1343

City	State	Zip Code
BIG TIMBER	MT	59011

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		26		2016

Amount of Each Disbursement this Period

23.71

☒ Memo Item

Transaction ID : SB17-1.0030

B. KEN LANTTA

Mailing Address 740 WEST 55TH ST

City	State	Zip Code
CASPER	WY	82601

Purpose of Disbursement
IN-KIND MILEAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		20		2016

Amount of Each Disbursement this Period

192.08

☐ Memo Item

Transaction ID : SB17-0.0017

C. STEPHANOS PAPADOPOULOS

Mailing Address 6489 JAKER CT

City	State	Zip Code
CHEYENNE	WY	82009

Purpose of Disbursement
GRASSROOTS CONSULTING/FIELD WORK

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		18		2016

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Transaction ID : SB17-0.0016

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2192.08

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

A. AMBI

Mailing Address PO BOX 2951

City	State	Zip Code
CASPER	WY	82602

Purpose of Disbursement
POSTAGE/PRINTING

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:	Primary	General
	Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
07 / 26 / 2016

Amount of Each Disbursement this Period

4404.85

☐ Memo Item

Transaction ID : SB17-0.0019

B. AMERICAN EXPRESS

Mailing Address PO BOX 53852

City	State	Zip Code
PHOENIX	AZ	85072

Purpose of Disbursement
MERCHANT PROCESSING FEES

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:	Primary	General
	Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
07 / 05 / 2016

Amount of Each Disbursement this Period

7.38

☐ Memo Item

Transaction ID : SB17-0.0006

C. CASPER CHAMBER OF COMMERCE

Mailing Address PO BOX 399

City	State	Zip Code
CASPER	WY	82602

Purpose of Disbursement
REGISTRATION FEE

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:	Primary	General
	Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
07 / 06 / 2016

Amount of Each Disbursement this Period

150.00

☐ Memo Item

Transaction ID : SB17-0.0009

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

4562.23

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

A. CMDIMailing Address 1593 SPRING HILL RD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
DATA ENTRY SVC

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		15		2016

Amount of Each Disbursement this Period

8.28

☐ Memo Item

Transaction ID : SB17-0.0012

B. CMDIMailing Address 1593 SPRING HILL RD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
DATA ENTRY SVC

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		22		2016

Amount of Each Disbursement this Period

67.50

☐ Memo Item

Transaction ID : SB17-0.0018

C. COMMONWEALTH CONSULTING

Mailing Address 9771 W. 71ST AVE

City ARVADA State CO Zip Code 80004

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2016

Amount of Each Disbursement this Period

1620.00

☐ Memo Item

Transaction ID : SB17-0.0002

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1695.78

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

A. COMPLIANCE CONSULTING, LLC

Mailing Address PO BOX 365

City	State	Zip Code
MCLEAN	VA	22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		06		2016

Amount of Each Disbursement this Period

4200.00

☐ Memo Item

Transaction ID : SB17-0.0008

B. INTUIT

Mailing Address 2700 COAST AVE

City	State	Zip Code
MOUNTAIN VIEW	CA	94043

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		18		2016

Amount of Each Disbursement this Period

18.86

☐ Memo Item

Transaction ID : SB17-0.0013

C. MAB STRATEGIES LLCMailing Address 999 E BASSE RD
STE 180 #454

City	State	Zip Code
SAN ANTONIO	TX	78209

Purpose of Disbursement
WEBSITE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2016

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Transaction ID : SB17-0.0001

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4468.86

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Christensen for Congress

Full Name (Last, First, Middle Initial)

A. ORR COMMUNICATIONS

Mailing Address 3421 WARREN AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		18		2016

City	State	Zip Code
CHEYENNE	WY	82001

Amount of Each Disbursement this Period

6170.81

Purpose of Disbursement
GRASSROOTS CONSULTINGCategory/
Type☐ Memo Item

Transaction ID : SB17-0.0014

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

B. REVOLUTIONS DELIVERED LLCMailing Address 106 EAST LINCOLNWAY
SUITE 309

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		18		2016

City	State	Zip Code
CHEYENNE	WY	82001

Amount of Each Disbursement this Period

10000.00

Purpose of Disbursement
GRASSROOTS CONSULTING/FIELD WORKCategory/
Type☐ Memo Item

Transaction ID : SB17-0.0015

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

C. THREE ELEPHANT PUBLIC RELATIONS

Mailing Address 6455 SPRING GULCH ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		06		2016

City	State	Zip Code
JACKSON	WY	83001

Amount of Each Disbursement this Period

4318.65

Purpose of Disbursement
WEB SERVICE/TRAVEL/DELIVERYCategory/
Type☐ Memo Item

Transaction ID : SB17-0.0007

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

20489.46

36855.96

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 34 OF 37

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC01

Christensen for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

LELAND CHRISTENSEN

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
220 W ALTA RD

City

State

ZIP Code

ALTA

WY

83414

Original Amount of Loan

4500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

4500.00

TERMS

Date Incurred

M M / D D / Y Y
02 / 29 / 2016

Date Due

M M / D D / Y Y
ON DEMAND

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

4500.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+9A=N5HCB
.

Form/Schedule: SC/10
Transaction ID : SC01

CANDIDATE LOAN FROM PERSONAL FUNDS

Form/Schedule:
Transaction ID:

SCHEDULE C (FEC Form 3)
LOANS

PAGE 36 OF 37

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC01_B

Christensen for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

LELAND CHRISTENSEN

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
220 W ALTA RD

City	State	ZIP Code
ALTA	WY	83414

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2000.00	0.00	2000.00

TERMS

Date Incurred

M 03 / D 31 / Y 2016 Y

Date Due

M M / D D / ON DEMAND Y

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

2000.00

TOTALS This Period (last page in this line only)..... ►

6500.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SC/10

Transaction ID : SC01_B

CANDIDATE LOAN FROM PERSONAL FUNDS

Form/Schedule:

Transaction ID: